

BLG/LHP  
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**PART B—ISSUE FEE TRANSMITTAL**

**MAILING INFORMATION:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
<i>Issue fee &amp; Audit 312 due 10/26/94 to callys 12M2A0726</i> BANNER, BIRCH, MCKIE & BECKETT 1001 G STREET, N.W. WASHINGTON, D.C. 20001-4597	INVENTOR'S NAME  Street Address  City, State and ZIP Code  CO-INVENTOR'S NAME  Street Address  City, State and ZIP Code  <input type="checkbox"/> Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/944,739	09/14/92	022	JORDAN, K.	1205 07/26/94
First Named Applicant	KYLE,	DAVID J.		

**TITLE OF INVENTION:** MICROBIAL OIL MIXTURES AND USES THEREOF

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1	1496-124A	514-547.000		UTILITY	YES	\$585.00	10/26/94

**3. Correspondence address change (Complete only if there is a change)**

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

2 \_\_\_\_\_  
3 \_\_\_\_\_

DO NOT USE THIS SPACE

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1 242 585.00 CK

**5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)**

(1) NAME OF ASSIGNEE: <b>Martek Corporation</b>	6a. The following fees are enclosed: \$585.00 <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____ 6b. The following fees should be charged to: <b>DEPOSIT ACCOUNT NUMBER 19-0733 (ENCLOSED PART C)</b> <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____ <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees _____ The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above <b>Signature of party in interest of record</b> <b>(Date)</b> <b>Laurence H. Posorske R/34,698 09/06/94</b> NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.
(2) ADDRESS: (CITY & STATE OR COUNTY) <b>Columbia, Maryland</b>	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION <b>Maryland</b>	
A. <input type="checkbox"/> This application is NOT assigned. <input type="checkbox"/> Assignment is being previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.	
<b>PLEASE NOTE:</b> Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.	

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